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SALOP EDUCATION COMMITTEE

SCHOOL HEALTH SERVICE

REPORT

of the

PRINCIPAL SCHOOL MEDICAL OFFICER

1954

COUNTY HEALTH OFFICE · COLLEGE HILL · SHREWSBURY

1955

ACKD 19.12.55
MBJ

To the Chairman and Members of the Salop Education Committee

SIR OFFLEY, SIR, LADIES AND GENTLEMEN,

I have the honour to present the Annual Report on the School Health Service for the year 1954.

There have been no new developments during the year as the work has been mainly of a routine nature. The statistics are set out in the usual form and it will be seen that the volume of work undertaken has been fairly considerable. The School Health Service is now so firmly established on fixed lines that there is little change to report from year to year.

The health of the school children in Shropshire has continued to be satisfactory. The medical examinations have revealed that the general improvement in their condition and nutrition has been more than maintained and there has been a marked fall in the numbers of those classed as "poor." Assessments by individual School Medical Officers may vary slightly, but there is fairly general agreement based on well recognised standards.

The year has been one which has seen some staffing difficulties, both medical and dental, and the schools are still not being visited with sufficient frequency although the number of primary and modern schools not inspected was considerably less than during the previous year.

Recruitment of suitable medical officers continued to prove a little easier and the School Dental Service had a more satisfactory year than in any year since 1949, even allowing for the fact that the staff remained 50 per cent below the strength required to fulfil the Council's obligations to pupils in attendance at maintained schools. The Service benefited by the appointment of a consultant orthodontist and by the employment of part-time anaesthetists to work with the dental officers. The scope of the Service was extended by the bringing into use of a "Gloster" Mobile Dental Unit which has more than fulfilled expectations, and seems to approach the ideal especially from the school point of view, and has been the means of offering treatment in districts where hitherto it has been impossible.

Diphtheria has been almost eliminated owing to the high level of immunity brought about by the Council's scheme for immunisation. During the last two years no cases have been notified in the County and only three during the past five years. The last death from diphtheria occurred in 1949. This is a satisfactory state of affairs, but there is no room for complacency and I cannot stress too strongly that vigilance is needed. Diphtheria Immunisation should be carried out in infancy or early childhood. If not done then it is urged as soon as the child enters school and reinforcing injections are given at approximately five yearly intervals during the child's school life.

In regard to the school meals service it is noteworthy that no serious outbreaks of food poisoning occurred.

To obtain a comprehensive conception of the sanitary conditions of the schools in the County it was arranged for each School Medical Officer to inspect all schools within their respective districts. Reports on a large proportion of the schools have been received and they provide valuable information of assistance in advising the Secretary for Education where repair and replacement is most urgently needed. Further progress was made in the very difficult task of improving the general hygiene of the older school premises.

Comments on the year's progress would not be complete without some acknowledgement of the conscientious and enthusiastic support of all members of the teaching and administrative staffs of the Education Department and the nursing and clerical staff of the School Health Service.

I am again indebted to the Chairman and members of the Education Welfare Committee for their interest and continued support.

I have the honour to be,

Your obedient Servant,

T. S. HALL,

PRINCIPAL SCHOOL MEDICAL OFFICER.

COUNTY HEALTH OFFICE,
COLLEGE HILL, SHREWSBURY.

July, 1955.

MEDICAL, DENTAL AND ANCILLARY STAFF

Principal School Medical Officer:

THOMAS S. HALL, M.B.E., T.D.; M.D., Ch.B., B.Sc., D.Obst.R.C.O.G., D.P.H.

Deputy Principal School Medical Officer:

WILLIAM HALL, M.B., Ch.B., M.R.C.S., L.R.C.P., D.Obst.R.C.O.G., D.P.H.

School Medical Officers:

KATHLEEN M. BALL, M.B., Ch.B., B.A.O.(Dub.), D.P.H.

AGNES D. BARKER, M.B., Ch.B.

M. ELIZABETH BUCKLEY, M.B., Ch.B. (commenced duty 1st October, 1954).

ELIZABETH CAPPER, M.B., Ch.B., D.P.H.

MARGARET EYRE HALL, M.B., Ch.B., D.Obst.R.C.O.G., D.C.H. (resigned 30th September, 1954).

MABEL N. JUDD, M.B., Ch.B. (part-time).

FLORA MACDONALD, M.B., B.S., D.P.H.

CATHERINE B. MCARTHUR, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.

JAMES MCGOVERN, M.B., Ch.B., D.P.H. (commenced duty 28th January, 1954).

PETER G. ROADS, M.D., B.S., M.R.C.S., L.R.C.P., D.P.H.

AUDREY ROSS, M.B., Ch.B. (resigned 12th June, 1954).

MARGARET H. F. TURNBULL, M.B., Ch.B., D.P.H.

Principal Dental Officer:

GERALD R. CATCHPOLE, L.D.S., R.C.S.Eng.

School Dental Officers:

CHARLES D. CLARKE, L.D.S.

JOHN B. CLARKE, L.D.S.

NOEL GLEAVE, L.D.S. (commenced duty 1st July, 1954).

REGINALD H. N. OSMOND, L.D.S., R.C.S. (part-time) (commenced duty 19th October, 1954).

GEOFFREY H. STOUT, L.D.S. (resigned 30th June, 1954).

GEORGE B. WESTWATER, L.D.S., R.C.S.

CONSULTANT ORTHODONTIST (part-time):

BRIAN T. BROADBENT, F.D.S. (commenced duty 8th November, 1954).

Psychiatrist (part-time):

CHARLES L. C. BURNS, M.R.C.S., L.R.C.P., D.P.M.

Educational Psychologists:

JOHN L. GREEN, B.A.

MARGARET THOMPSON, B.A.

Psychiatric Social Worker:

KATHLEEN CARPENTER.

Speech Therapists:

AALISH MARY GAWNE, L.C.S.T.

EDWARD PAULETT, L.C.S.T.

REPORT FOR THE YEAR 1954

GENERAL

The area covered by the Local Education Authority comprises 861,800 acres; and in June, 1953, the date on which the most recent population figures of the Registrar General were published, the estimated civil and military population was 299,300—an increase of 3,800 compared with the estimated population for 1952.

The number of pupils on the school register in 1954 was 45,139, compared with 44,271 in the previous year—an increase of 868.

At the end of 1954, there were in the County of Salop, including the Borough of Shrewsbury:—

273 Primary Schools containing 285 departments;

17 Secondary Modern Schools (one of which is a Boarding School), containing 17 departments;

17 Secondary Grammar Schools;

4 Technical Colleges;

3 Nursery Schools; and

3 Special Residential Schools—one for Educationally Subnormal Boys,
one for Educationally Subnormal Girls, and
one for Maladjusted pupils of either sex, but as regards boys to the
age of 10 years only.

The staff of the School Health Service during 1954 was as follows:—

					1st January	31st December
Principal School Medical Officer	..	..	..		1	1
Deputy Principal School Medical Officer	..	..			1	1
School Medical Officers (Full-time)	..	..	..		9	5
School Medical Officers (Part-time)	..	..	..		1	5
Principal School Dental Officer	..	..	..		1	1
Dental Officers	..	..	..	..	4	4
Dental Officers (Part-time)	..	..	..	..	—	1
Orthodontist (Part-time)	..	..	..	..	—	1
Dental Attendants	..	..	..	..	5	6
Speech Therapists	..	..	..	..	2	2
Whole-time School Nurses	..	..	..	..	3	3
Part-time School Nurses	..	..	..	..	2	1
Health Visitors undertaking School Nursing		..			27	22
District Nurses undertaking School Nursing		..			32	32

During 1954 there was an average of five and a half School Medical Officers in the full-time employment of the County Council, approximately three-fifths of whose time was available for School Health work and two-fifths for other duties. In addition, four Medical Officers hold mixed appointments of Assistant County Medical Officer and District Medical Officer of Health, and gave service to the County Council equivalent to that of two and a half whole-time officers. One Medical Officer employed on a part-time basis devoted on an average four-elevenths of her time to County Council work.

The number of children examined at routine medical inspections during 1954 was 17,415 compared with 19,444 during 1953; but 10 Primary, 1 Modern and 2 Grammar Schools were not inspected during the year.

MEDICAL INSPECTION AND TREATMENT

Routine Medical Inspections.—Under Section 48 of the Education Act, 1944, it is the duty of the Local Education Authority to provide for the medical inspection of all pupils in attendance at maintained schools, including County Colleges; and under this Section parents are required to submit their children for inspection when requested to do so by an authorised officer of the Local Education Authority.

The obligation of the Local Education Authority to provide free medical treatment is almost entirely discharged by taking advantage of the facilities made available under the National Health Service Act, 1946, and children found to be suffering from defects, ascertained in the course of a Routine Medical Inspection or attendance at a School Clinic, are referred in the first instance to their own doctors. The duty of following up pupils found to need supervision or treatment is carried out by the School Nurses, and arrangements are made either directly or through their own doctors for those in need of Specialist advice or hospital treatment to be dealt with, according to the nature of the defect, at one or other of the hospitals, particulars of which are given on pages (23) and (24) of this report, and all of which come under the Birmingham Regional Hospital Board.

Particulars of the School Clinics provided by the Local Education Authority have also been included in this report on pages (24) and (25).

Treatment of Eye Conditions.—A total of 2,968 children, suffering from defective vision or other affections of the eye, was dealt with in one or other of the following ways:—

Hospital Eye Service.—In arranging for treatment for children suffering from eye conditions, advantage is taken as far as possible of the Hospital and Specialist Services provided by the Regional Hospital Board; and in 1954, 1,380 school children received treatment under these services.

Supplementary Ophthalmic Services Scheme—At Market Drayton and Ludlow, arrangements are made for pupils to be examined by Ophthalmic Medical Practitioners. At the former, ad hoc clinics are held at convenient intervals, whilst at the latter, the pupils are examined by the Consultant at his rooms.

The following are particulars of pupils examined during 1954:—

Ludlow	..	..	169
Market Drayton	..	..	64
Total	..	..	<hr/>233 <hr/>

Many school children are referred for treatment by general medical practitioners for defective vision, to Ophthalmic Medical Practitioners or Ophthalmic Opticians, and during 1954 a total of 1,355 school children was dealt with in this manner.

Tonsil and Adenoid Conditions.—Next to defects of vision, tonsil and adenoid conditions are those most prevalent in school children, and efforts are made to get all cases for whom treatment is recommended examined as soon as possible by an Ear, Nose and Throat Specialist. The Consultant, in deciding whether operative treatment is in fact necessary, also allots whatever degree of priority is applicable to a particular case.

The position with regard to the treatment of school children suffering from tonsil and adenoid conditions is represented by the following tabular statement, which covers the period 1937 to 1954:—

Year	Referred for Treatment		Operations performed
	Percentage of children examined	Actual cases	
1937	4.0	428	421
1938	4.7	463	393
1939	3.2	314	336
1940	3.6	412	321
1941	4.3	542	317
1942	4.5	402	383
1943	3.6	298	245
1944	4.2	441	362
1945	2.7	328	300
1946	3.9	537	249
1947	4.2	520	333
1948	4.9	821	795
1949	4.5	702	568
1950	4.8	722	347
1951	2.7	406	677
1952	2.6	450	782
1953	2.8	546	524
1954	2.2	387	805

According to statistics supplied by the various Hospital Management Committees particulars of the 805 operations performed during 1954 are as follows:—

<i>Hospital Management Committees</i>	<i>Hospitals</i>	<i>No. of Operations in 1954</i>
Group No. 4— (Welsh)	Llandrindod Wells	1
Group No. 10—	Leominster	1
Group No. 15—	Copthorne	286
	Eye, Ear and Throat	154
	Oswestry and District	16
	Whitchurch Cottage	45
	Ludlow District	45
	Ellesmere Cottage	5
		<hr/> 551
Group No. 16—	Bridgnorth and South Shropshire Infirmary ..	107
	Shifnal Cottage	142
	New Cross	3
		<hr/> 252
Grand Total ..		<hr/> 805

The hospital figures include an unascertainable number of cases of children of school age who do not fall within the purview of the School Health Service.

Treatment of Minor Ailments.—Particulars of Clinics which are provided by the Local Education Authority for the treatment of Minor Ailments are included in the list on pages (24) and (25) of this report. The attendances during the year 1954 at the eight Minor Ailment Clinics concerned are given in the table below.

Since the coming into operation in July, 1948, of the National Health Service Act, when every school child became entitled to receive free treatment from a private doctor, there has been an understandable decline in the attendances at the Minor Ailment Clinics.

Clinic	Children referred at S.M.I.	Other Children	Examinations by Medical Officers	Attendances	Results of Treatment			Referred to Hospital or own doctor
					Remedied	Improved	Unaltered	
Bridgnorth ..	1	303	338	1,391	251	1	3	49
Ironbridge ..	—	230	315	649	225	—	—	5
Market Drayton ..	2	8	18	25	2	3	1	4
Oswestry ..	206	3	287	739	165	10	—	34
Shrewsbury:								
Monkmoor ..	4	689	—	1,517	643	31	10	9
Murivance ..	8	250	181	560	145	9	18	86
White House ..	3	348	481	2,400	274	9	—	68
Wellington ..	6	315	358	1,382	295	2	—	24
Total ..	230	2,146	1,978	8,663	2,000	65	32	279

Ascertainment and Treatment of Handicapped Pupils.—During 1954 a total of 470 pupils was examined under the provisions of the Handicapped Pupils and School Health Service Regulations, 1953, issued by the Minister of Education under Section 33 of the Education Act, 1944, and a summary of the findings of the Medical Officers and also of the recommendations made to the Local Education Authority are given below:—

HANDICAPPED PUPILS

Category	Findings of School Medical Officers									Under treatment by Psychiatrist
	Pupils Specially Ex- amined	Not Handi- capped	Decision deferred	Special Educational Treatment Recommended			Reported to Mental Deficiency Authority		Pupils not requiring Super- vision on leaving school	
				In Ordinary School	In Special School	Home Tuition	In- educable	Super- vision on leaving school		
Blind	1	—	—	—	1	—	—	—	—	—
Partially Sighted	4	—	—	—	4	—	—	—	—	—
Deaf	3	—	—	—	3	—	—	—	—	—
Partially Deaf	3	—	—	—	3	—	—	—	—	—
Delicate	27	—	—	—	22	5	—	—	—	—
Educationally Sub-Normal	299	20	14	119	70	—	27	20	29	—
Epileptic	2	—	—	—	1	1	—	—	—	—
*Maladjusted	115	—	—	—	13	—	—	—	—	102
Physically Handicapped	16	—	—	—	7	9	—	—	—	—
Total for 1954 ..	470	20	14	119	124	15	27	20	29	102

*Examined by Visiting Psychiatrist.

NOTE: Although the table above shows that 470 pupils were specially examined during 1954, the number of special examinations arranged was 758. This figure includes examinations in connection with the unsatisfactory school attendance of pupils, the provision of transport to and from school and the review of home tuition cases.

Report to Mental Deficiency Authority.—During 1954, a total of 47 children was reported to the Local Health Authority under Section 57 of the Education Act, 1944—27 under sub-section 3 as being ineducable; and 20 under sub-section 5, as being in need of supervision after leaving school.

The comparable figures for 1953 were 27 under sub-section 3, and 36 under sub-section 5—a total of 63.

Education of Children in Hospitals.—The Robert Jones and Agnes Hunt Orthopaedic Hospital is the only one in this County with which the Education Committee have entered into an arrangement for the provision of special educational facilities. In other hospitals in the County, when a child is admitted whose stay is likely to extend over a prolonged period, special arrangements are made for the child to receive a certain amount of individual tuition, if his medical condition is such that he will be able to benefit from it; and in 1954 a total of 24 pupils—all patients in the Children's Unit, Monkmoor Hospital, Shrewsbury—received special tuition in this way.

Cleanliness Inspections.—The School Nurses carry out routine inspections for verminous infestation of pupils in all Primary and Secondary Modern Schools, three Secondary Grammar Schools and one Secondary Technical School, follow-up inspections being made in the case of those pupils found to harbour nits or lice.

The School Nurses carry out routine cleanliness inspections of all pupils as early as possible in each term, when an *Informal Cleansing Notice* is issued to the parent of any pupil found to be verminous.

These pupils are re-examined one week later, and if any are still found to be verminous, *Formal Cleansing Notices* are served on the parents by the Principal School Medical Officer, requiring them to disinfest and to present them for re-examination by the School Nurse at the end of three days.

If on the occasion of the third inspection a pupil is still found to be in a verminous condition, the Nurse reports the facts to the Principal School Medical Officer, who decides whether or not to issue a *Formal Cleansing Order*, instructing the Nurse to convey the pupil to the nearest School Clinic to be cleansed by her.

All pupils who have been cleansed, either by the parents or under arrangements made by the Local Education Authority after the serving of a Formal Cleansing Notice or the issue of a Formal Cleansing Order, are subsequently examined by the School Nurse, and in the event of their being found to be re-infested, they are reported to the Principal School Medical Officer, who is empowered to recommend the institution of legal proceedings by the Local Education Authority.

During 1954, a total of 114,399 head inspections was carried out by the School Nurses, and 1,337 pupils were found to be verminous, some on more than one occasion. The number of pupils found verminous represents a percentage of 3.5 of the total number on the registers of the schools inspected—0.5 per cent. more than in 1953.

The following table sets out the position for the nine years from 1946 to 1954:—

Year	Pupils on Register of Schools Inspected	Verminous Pupils	Percentage Verminous
1946	29,258	2,486	8.5
1947	30,003	2,106	7.0
1948	32,873	2,534	7.7
1949	33,424	2,066	6.2
1950	34,593	1,935	5.6
1951	36,259	1,501	4.1
1952	37,545	1,418	3.8
1953	39,187	1,179	3.0
1954	38,448	1,337	3.5

It was found necessary during the year to issue 79 Formal Cleansing Notices and 10 Cleansing Orders. Consequent upon reinfestation, legal proceedings were instituted in respect of one child, the parents of whom were fined £1.

Work of School Nurses.—School nursing is undertaken by 3 whole-time and 1 part-time School Nurses, 22 Health Visitors and 32 District Nurses (who devote a certain amount of their time to school nursing duties). In addition to their visits to schools in connection with the carrying out of head inspections, the School Nurses are required to attend the medical inspections at those schools for which they have been made responsible.

Children ascertained by the School Medical Officers to be suffering from defects of any kind are either referred for treatment or noted for observation; and the subsequent follow-up work of the School Nurses, together with the number of days which they give to Routine Medical Inspections, is indicated in the following table:—

	Medical Inspection Days	Treatment Cases				Observation Cases			Totals	
		No.	Visited	Not Visited	Treated	No.	Visited	Not Visited	Cases	Visits
District Nurses ..	138½	1,098	1,002	96	1,051	545	406	139	1,643	2,569
School Nurses ..	168½	1,531	1,202	329	1,524	128	86	42	1,659	2,416
Health Visitors ..	478	2,050	1,551	499	1,900	666	396	270	2,716	2,386
Totals ..	785	4,679	3,755	924	4,475	1,339	888	451	6,018	7,371

Vocational Guidance.—In the early part of 1945, a scheme was put into operation in the Primary and Secondary Modern Schools under which the School Medical Officer makes a special report (at the time of the last routine medical examination of each pupil) indicating whether, or not he considers the pupil suitable, on medical grounds, for work of any particular type. When the pupil leaves school this report is sent by the Head, together with the "School Leaving Report," to the Local Office of the Ministry of Labour or to the Juvenile Employment Bureau. It is then used by the Vocational Guidance Officers in order to ensure that a pupil, on leaving school, is not put to employment for which he is either mentally or physically unsuited.

As an expansion of this scheme, an opportunity for enrolment in the Register of Disabled Persons is given to those pupils who, in the opinion of the Medical Officers, are likely to have difficulty by reason of some disability of body or mind in obtaining or keeping employment. They then have an opportunity of obtaining through the Ministry of Labour not only sheltered employment, but also the special educational training open to those whose names are on the Register of Disabled Persons.

Employment of Children.—Every pupil reported by the Secretary for Education as being engaged in employment outside school hours is examined by a School Medical Officer under the provisions of Section 59 of the Education Act, 1944, in order to determine whether or not he is being employed in a manner likely to be prejudicial to his health or to render him unfit to obtain the full benefit of the education provided for him.

Of 507 pupils examined in this connection during the year 1954, it was necessary to recommend that employment should be terminated in two cases, that the hours of employment should be reduced in two further cases, that nine others should be re-examined at intervals ranging from one to six months and that two pupils should not be required to lift heavy weights.

Medical Inspections of Pupils resident in Special Schools, Boarding Schools and Hostels.—

It is considered that the Education Authority has a special responsibility for the care of children accommodated in hostels and boarding houses, or resident in special schools within the County, and in May, 1948, special arrangements were made for the medical examination of children in these residential establishments.

These provide for a medical examination to be carried out in September, within a fortnight of the opening of the schools at the beginning of the school year, and later entrants are likewise examined within a fortnight of receipt of notice of admission from the Head of the School.

The visiting Medical Officer passes on to the Head of the School, or Warden of the Hostel, any information in connection with the wellbeing of the pupils arising out of such examination, in order that he may give appropriate instructions for special care to be taken, where such has been found to be desirable.

In order that medical advice may be readily available in the event of illness, the name of each pupil in these residential establishments has been included in the list of a local Medical Practitioner who has undertaken to provide General Medical Services under the National Health Service Act.

Nutrition.—The Ministry of Education recommend that, in their assessment of the nutrition of pupils, Medical Officers should divide them into three groups, “good,” “fair,” and “poor.”

NUTRITIONAL GROUPS FOR YEARS 1947 TO 1954

Year	Classification in Percentages														
	Entrants			Second Age Group			Third Age Group			Other Periodic			Total		
	Good	Fair	Poor	Good	Fair	Poor	Good	Fair	Poor	Good	Fair	Poor	Good	Fair	Poor
1947	24	72	4	27	68	5	32	67	1	—	—	—	28	69	3
1948	28	68	4	28	67	5	29	67	4	—	—	—	28	68	4
1949	31	66	3	26	70	4	33	65	2	—	—	—	31	66	3
1950	38	60	2	31	66	3	39	59	2	—	—	—	36	61	3
1951	45	53	2	42	56	2	47	52	1	—	—	—	45	53	2
1952	53	46	1	47	52	1	57	43	—	45	54	1	50	49	1
1953	49	50	1	49	50	1	60	40	—	45	54	1	50	49	1
1954	54	45	1	56	43	1	62	38	—	56	43	1	56	43	1

The findings of the School Medical Officers indicate that the general improvement in the nutrition of the school children has been more than maintained. It must be remembered, however, that the percentages are merely an assessment of nutrition by the Medical Officers in the light of a number of factors—to say nothing of the personal element involved.

Medical Examination of Prospective Teachers.—During the year 1954, some 160 candidates for entry to the teaching profession were examined by the medical staff of the School Health Service. In view of the fact that a number of the candidates had already taken advantage of mass radiography facilities, only 122 of these cases were required to undergo an X-ray examination of the chest.

Milk.—From 6th August, 1946, milk has been supplied under the Milk in Schools Scheme free of charge in all grant aided schools and a census taken on 9th October, 1954, shows that 74.8 per cent. of the pupils in attendance on the day of the census took advantage of this Scheme.

Meals.—On 9th October, 1954, there were 314 schools with an attendance of 41,900 pupils (92.8 per cent. of the pupils then on the register) served with meals from school canteens; but only 26,317 of these pupils (62.8 per cent. of those for whom canteen facilities were available) took advantage of this service.

Quality of Milk Supplies.—Approval of milk supplied to schools under the Milk in Schools Scheme is normally restricted to that designated as “Tuberculin Tested” or “Pasteurised,” although two school Departments received milk designated as “Accredited” until 1st October, 1954, when the designation “Accredited” was abolished and in consequence the two supplies became undesignated until the end of the year. Since then bottled Pasteurised milk has been supplied to the two schools concerned.

The following particulars indicate in respect of the years 1951 to 1954 inclusive the numbers of School Departments receiving milk and the grades of milk supplied:—

Grade of Milk	School Departments			
	1951	1952	1953	1954
Tuberculin Tested ..	76	73	57	42
Pasteurised ..	247	245	268	286
Accredited ..	4	2	2	—
Undesignated ..	5	5	—	2
Total ..	332	325	327	330

Investigation of Milk Supplies.—The County Sanitary Officer is responsible for the supervision of school milk supplies and the necessary samples are obtained by the Sampling Officers of the County Health Department. Each milk is examined for cleanliness at quarterly intervals, and with the exception of “Pasteurised” milk, undergoes a biological test for tubercle bacilli at intervals of six months.

The following table gives the results of the examination of samples taken during 1954:—

EXAMINATION OF SCHOOL MILK SUPPLIES

Examination	Samples				
	Total	Satisfactory		Unsatisfactory	
		No.	Percentage	No.	Percentage
Cleanliness and keeping quality ..	392	356	91	36	9
Biological ..	51	51	100	—	—

Tubercular Adenitis.—Arrangements have been made by the Principal School Medical Officer for all cases of Tubercular Adenitis in children to be notified to him by the Chest Physicians, to enable an investigation to be made into both the school and home milk supplies if the Chest Physician considers this to be necessary.

During 1954 Tubercular Adenitis was reported in 3 school children and 3 samples of milk from 3 sources were obtained by the Sampling Officers of the County Health Department and examined for the presence of tubercle bacilli. The results of the biological examination of all 3 samples proved to be negative.

SANITARY CIRCUMSTANCES OF THE SCHOOLS

In a Rural County it is quite impossible to attain anything like uniformity of standard in the sanitary circumstances of the Schools, varying as they do in size, and situated as they are both in urban and rural surroundings. Many of the older Schools fall far short of what is required in the matter of lighting, heating and ventilation, and the unsatisfactory nature of the sanitary conveniences at certain schools cannot altogether be justified by the limitations imposed by the absence of public services in the localities in which the Schools are situated.

Under the post-war School Building Programme provision was made, as a long term policy, for the closure of certain of the older schools where the conditions were least satisfactory, and for the construction of new schools, either to replace those scheduled for closure or to accommodate the increased number of pupils resulting from the raising of the school leaving age. Owing, however, to the need for curtailing works involving capital expenditure, the long term building programme has had to be modified, and only certain priority school building work is at present being undertaken.

However, in a Ministry of Education Circular dated 3rd December, 1954, to Local Authorities, reference is made to the fact that the Government have decided to make additional resources available for investment in educational buildings. In particular control over the amount spent on projects up to £10,000 is to be abolished, action is to be taken to re-organise all schools in rural areas and the scope of building for vocational education enlarged.

The Authority's Education Works Committee are certainly hoping to deal during 1955/56 with a larger number of minor works of improvement than has been possible in recent years.

The School Medical Officers are required to report any sanitary defects discovered at the time of medical inspection, and particulars of these defects and recommendations which may be considered appropriate, are forwarded to the Secretary for Education with a view to their being dealt with by the Education Works Committee.

The following are particulars of schools and extensions opened and alterations and improvements carried out at schools in the County during 1954:—

SCHOOLS AND EXTENSIONS OPENED:

Primary:

Alveley County	1 additional classroom
Bridgnorth, Stourbridge Road	4 classrooms
Ford C.E.	Additional classrooms
Marton	Re-opened as an annexe to Chirbury
Shrewsbury, Sundorne County Infants' ..	2 additional classrooms
Wellington, Orleton Lane County Infants'	1 additional classroom
Whitchurch C.E. Infants'	2 classrooms

Modern:

Market Drayton Modern	3 classrooms by temporary adaptation of the Grove House, Market Drayton
Shrewsbury, Harlescott Modern	New school
Wellington Modern	Extensions

Grammar and Technical:

Coalbrookdale County High	Additional changing accommodation, sanitary offices and staffroom
Walker Technical College	Electrical and engineering workshops

ALTERATIONS AND IMPROVEMENTS:

Primary:

Acton Burnell C.E. (Controlled) ..	..	Improvements to heating
Alveley County .. ..	..	Treatment of external walls to prevent dampness
Atcham Temporary County ..	..	Providing store
Atcham C.E. (Controlled) ..	..	Ditto
Barn Farm County Infants' ..	..	Groundsman's store
Bridgnorth County Infants' ..	..	Ditto
Brockton C.E. (Controlled) ..	..	Provision of Elsan closets
Broseley Wood C.E. (Controlled) ..	..	Installation of electricity
Buildwas County .. ..	..	Hot water heater
Burford C.E. (Controlled) ..	..	Electrical installation and water-borne sanitation
Chelmarsh C.E. .. ..	..	Fuel store
Cheswardine County .. ..	..	Improvements to natural lighting
Church Pulverbatch C.E. (Controlled) ..	..	Installation of Destrol closets
Cleobury Mortimer C. Junior ..	..	Improvements to heating and hot water supply
Culmington C.E. (Controlled) ..	..	Electrical installation; conversion to waterborne sanitation; provision of lavatory basins and hot water supply
Dawley St. Leonard's Junior ..	..	Provision of groundsman's store
Donnington Wood C.E. (Controlled) ..	..	Improvements to heating and natural lighting
Down County .. ..	..	Electrical installation
Ellerdine County .. ..	..	Ditto
Eyton County .. ..	..	Fuel store and erection of screen
Farlow C.E. (Controlled) .. ..	..	Improvements to heating
Ford C.E. (Controlled) .. ..	..	Calor gas lighting
Gobowen County .. ..	..	Providing playing space
Great Hanwood C.E. (Controlled) ..	..	Provision of hot water supply
Hadley County .. ..	..	Provision of Elsans
Hadnall C.E. (Controlled) .. ..	..	Improvements to heating
High Hatton P. (Controlled) ..	..	Waterborne sanitation
Highley County .. ..	..	Improvements to sanitation
Hodnet County .. ..	..	Hot water supply
Ironbridge C.E. (Controlled) ..	..	New store shed and improvements to electrical installation
Kinlet C.E. (Controlled) .. ..	..	Partition to large room
Ketley Bank County .. ..	..	Conversion to waterborne sanitation, including provision of washbasins
Kinnerley C.E. (Controlled) .. ..	..	Provision of staff room
Knowbury C.E. (Controlled) .. ..	..	Additional washbasins
Langley County .. ..	..	Electrical installation
Lawley County .. ..	..	Provision of store
Little Wenlock County .. ..	..	Improvements to heating; provision of washbasins with hot water supply
Ludlow .. ..	..	Improvements to heating
Lydbury North C.E. (Aided) ..	..	Provision of playing field
Madeley C.E. (Controlled) .. ..	..	Waterborne sanitation
Madeley County Infants' .. ..	..	Waterborne sanitation; improvements to heating
Madeley Wood Methodist (Controlled) ..	..	Fuel store
Mainstone County .. ..	..	Electrical installation
Market Drayton, Mount Lane County ..	..	Destrol closets
Marton C.E. .. ..	..	Provision of partition; improvements to lighting
Minsterley County .. ..	..	Provision of electricity
Morda C.E. (Controlled) .. ..	..	Waterborne sanitation
Munslow C.E. .. ..	..	Store shed
Neen Savage C.E. (Controlled) ..	..	Destrol closets
Newcastle C.E. (Controlled) .. ..	..	Electrical installation
Newport C.E. .. ..	..	Improvements to water supply and additional washbasins; improvements to heating
Norbury County .. ..	..	Improvements to sanitation and to lighting
Oswestry C.E. (Controlled) .. ..	..	Improvements to water supply
Pool Hill County .. ..	..	Improvements to lighting
St. Georges C.E. .. ..	..	Hot water supply to basins
Shawbury C.E. (Controlled) .. ..	..	Additional washbasins
	..	Provision of Elsans

Sheriffhales County	..	..	..	Partition
Shifnal C.E. (Controlled)	..	..	..	Improvements to urinal
Shrewsbury, All Saints' C.E. (Controlled)				Improvements to heating
Shrewsbury Coleham County	..	..	..	Hot water supply
Shrewsbury Harlescott County	..	..	..	Improvements to playing field
Smethcote C.E. (Controlled)	..	..	..	Destrol sanitation
Stoke Heath County	..	..	..	Improvements to heating
Tibberton C.E. (Controlled)	..	..	..	Provision of washbasins and chemical closets; electrical installation
Tong P. (Controlled)	..	..	..	Improvements to heating
Wattlesborough C.E. (Controlled)	..	..	..	Provision of Elsans; fuel store and improvements to heating
West Felton C.E. (Controlled)	..	..	..	Waterborne sanitation; washbasins with hot water supply and minor improvements
Weston Rhyn County	..	..	..	Improvements to water supply
Whitchurch C.E. (Controlled)	..	..	..	Electric lights and improvements to ventilation
Whixall County	..	..	..	Conversion to Destrol sanitation
Wistanstow C.E. (Controlled)	..	..	..	Elsan closets
Wombridge County	..	..	..	Improvements to lighting
Worfield C.E. (Aided)	..	..	..	New sanitary block
Wrockwardine Wood C.E. (Controlled)				Improvements to water closets.

Modern:

High Ercall Modern	..	..	..	Cycle storage; improvements to lighting; partitioning large hut
Wem Secondary Modern	..	..	..	Heating improvements

Grammar and Technical:

Bishop's Castle County High	..	..	..	Improvements to sanitary accommodation and electrical installation; construction of 'bus park; provision of partition
Bridgnorth Grammar	..	..	..	Improvements to field
Coalbrookdale County High	..	..	..	Groundsman's store
Ludlow Grammar	..	..	..	Hot water supply to pavilion on field
Priory Boys'	..	..	..	Improvements to lighting
Walker Technical College	..	..	..	New cycle shed; improvements to water supply
Wellington Grammar	..	..	..	Lighting unit to stage

Special Residential Schools and Hostels:

Haughton Hall	..	..	..	..	Improvements to Matron's quarters
Millichope	..	..	..	..	Improvements to heating and water supply
Petton Hall	..	..	..	..	Improvements to sanitary accommodation; heating; alteration to sewage disposal scheme
The Elms Hostel	..	..	..	..	Improvements to lighting and heating

The alterations and improvements detailed above do not include a large number of repairs which are regarded as maintenance items, e.g. renewal of heating boilers and of floors, nor the re-decoration of buildings carried out on a rota system each year and resurfacing of playgrounds, a proportion of which are dealt with each year.

Speech Therapy.—The following is the report of Miss A. M. Gawne and Mr. E. Paulett, Speech Therapists:—

“The County is divided into two areas for the purpose of Speech Therapy, and during the year 1954 Speech Therapy Clinics were held at the following Centres:—

NORTH-WEST AREA (MISS GAWNE)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning ..	Oswestry	—	Whitchurch	Murivance	—	Murivance
Afternoon ..	Oswestry	Bishop's Castle	Wem	Murivance	Market Drayton	—

In addition, weekly visits were made to two schools for part of the year for the treatment of children, and one child was treated in hospital.

SOUTH-EAST AREA (MR. PAULETT)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning ..	Wellington	—	Ironbridge	Ludlow	Bridgnorth	—
Afternoon ..	Wellington	Newport	Dawley	Ludlow	Bridgnorth	—

In addition, for a part of the year one child suffering from spastic paralysis was provided with treatment at his home.

CASES TREATED

On Register 1st January	New Cases during year	Cases Discharged during year	On Register 31st December
115	103	102	116

PARTICULARS OF CASES DISCHARGED

Normal	Substantially Improved	Unlikely to benefit by further treatment		Referred to Other Services	Left School or Ceased	Total
		Slightly Improved	Unimproved			
17	38	22	5	3	17	102

In a small number of cases discharge is temporary, and children can attend later for further treatment.

The following table gives particulars of the conditions on account of which it was found necessary for these 218 children to attend for speech therapy:—

Stammer*	73	Deafness	—
Cleft Palate*	17	Partial Deafness*	3
Severe Dyslalia	35	Educational Subnormality*	9
Dyslalia	62	Dysarthria*	4
Nasality + or —	4	Mixed Defect	3
Voice Defect	—	Cluttering	—
Mutism	6	Dysphasia	2

*These totals include eleven children who were accepted from four neighbouring counties. Financial responsibility for the treatment of these children was undertaken by the parent authority.

13 adults were treated (11 at Centres, 1 at home and 1 in hospital).

25 children made single visits to the Centres for advice.

10 visits were made to individual homes.

12 visits were made to schools, to see children and to discuss cases with teachers (these visits were often very helpful in the treatment of difficult cases at the Centres).

The tape recorder which was provided early in 1954 for speech therapy purposes has proved a valuable help in the keeping of records, and in treatment of individual patients.

Attendance was made during the year at a Refresher Course in Edinburgh and at the Cerebral Palsy Conference in London."

A. M. GAWNE } *Speech Therapists*
E. PAULETT }

Child Guidance.—Maladjusted children with nervous difficulties or behaviour problems are referred to a Child Guidance Clinic which is held in Shrewsbury on Monday of each week from 10.0 a.m. until 4.0 p.m. It is staffed by a Child Guidance Team consisting of a part-time Visiting Psychiatrist, two Educational Psychologists, and a Psychiatric Social Worker.

In addition, the Psychiatric Social Worker and one of the Educational Psychologists made a weekly visit to the Welfare Centre at Wellington on Wednesday, and to the Infant School at Donnington on Tuesday, to see children, and their parents. In some of these cases it is an initial interview and reference is usually made later to the Shrewsbury Clinic for Psychiatric opinion. In other cases it is possible to carry out treatment which the Psychiatrist has suggested in consultation with the Child Guidance team in Shrewsbury.

The Psychiatric Social Worker and an Educational Psychologist also visited from time to time the Welfare Centres at Ludlow, Market Drayton and Whitchurch, for the purpose of interviewing new patients and for following up suggestions made by the Psychiatrist.

There was a smaller number of cases referred last year but as far as can be seen this was purely fortuitous. As it happened, some of the cases needed prolonged treatment, and it was possible, therefore, to give them the attention and support they needed.

Statistics relating to pupils who were treated at the Child Guidance Clinics during 1954 are contained in the following report of Dr. C. L. Burns, Visiting Psychiatrist:—

SUMMARY OF WORK DONE DURING 1954:

Total number of new cases referred to Psychiatrist	160
Total number of new cases seen	154
Old cases still requiring help	61

Sources of cases:

Head Teachers	..	..	..	..	..	..	..	..	..	..	..	..	33.0%
County Medical Officer	..	..	..	..	..	..	..	..	..	..	..	..	20.0%
Parents	..	..	..	..	..	..	..	..	..	..	..	..	12.0%
Private Doctors	..	..	..	..	..	..	..	..	..	..	..	..	8.0%
Probation Officers	..	..	..	..	..	..	..	..	..	..	..	..	10.0%
Miscellaneous, e.g. Children's Department, Mental Hospital, School Enquiry Officers, Speech Therapists, N.S.P.C.C.	..	..	..	..	..	..	..	..	..	..	..	..	17.0%

Reasons for reference:

Failure in school. Difficulties either in specific subjects, general behaviour or general attitude to work	..	..	..	..	..	..	..	..	..	..	..	..	22.0%
Nervous conditions, such as night terrors, anxiety conditions, stammering and timidity	..	..	..	..	..	..	..	..	..	..	..	..	31.0%
Behaviour difficulties such as aggressive behaviour, severe tempers, truancy, pilfering	..	..	..	..	..	..	..	..	..	..	..	..	22.0%
Physical disorders, e.g. day or night enuresis, soiling, failure to eat or sleep normally	..	..	..	..	..	..	..	..	..	..	..	..	19.0%
Miscellaneous reasons. Vocational guidance, advice re adoptions, reports to Magistrates	..	..	..	..	..	..	..	..	..	..	..	..	6.0%

Number of cases seen by Psychiatrist	..	..	..	..	..	..	..	..	..	..	..	..	115
Number receiving prolonged treatment by Psychiatrist	..	..	..	..	..	..	..	..	..	..	..	..	31
Number recommended to Trench Hall	..	..	..	..	..	..	..	..	..	..	..	..	13

PRINCIPAL SCHOOL DENTAL OFFICER'S REPORT

The School Dental Service has had a more encouraging year in 1954 than in any year since 1949, even after allowing for the fact that the strength of the staff still remained at the end of the year 50% below that required to fulfil the Council's obligations to the pupils in maintained schools.

The improvement in the staffing situation which took place in the latter part of 1953 was maintained and slightly bettered towards the end of 1954. This improvement led to an all-round increase in the volume and scope of the treatment carried out for the children.

The Service was also benefited and improved by the appointment of a consultant orthodontist and by the engagement of part-time anaesthetists to work with the dental officers in the dental base clinics in all parts of the County. Further, the taking into use of the dental facilities provided in the newly built child welfare centre at Dawley, the delivery of the first "Gloster" Mobile Dental Unit with its use in the remoter parts of the County and the installation of some of the latest type of dental equipment in the clinic at Shrewsbury were events contributing substantially to the prestige of the Service and to the standard of treatment the dental officers were able to provide for their patients.

Staff.—The approved establishment of dental officers is 11 full-timers. At the end of the year the staff consisted of 5 full, and 2 part-time men, totalling 5.13 in terms of full-time officers. The total service rendered to the School Health Service during the year was equivalent to 4.75 officers in the same terms, a gain of 1.3 over 1953. Persistent advertising of vacancies failed to result in a gain in full-time staff but one part-timer was recruited. County Councils and County Boroughs situated in the populous regions of the country, particularly where dental schools are located, are in a more favourable position to obtain part-time dental officers than is a Local Authority situated as Shropshire is on the periphery of such a region. Dentists with time to spare to undertake work for a Local Authority seem to cluster within the thickly populated regions and not venture far away from them, partly no doubt on account of the inevitable loss of valuable time involved in the consequent travelling.

Mr. G. H. Stout, who took up duty in the Wellington area in September, 1953, left the Council's employ on 30th June, 1954.

Mr. N. Gleave was appointed to the Ludlow area and began duty on 1st July, 1954.

Mr. R. H. N. Osmond began duty as a part-time officer at the clinic in Shrewsbury on 19th October, 1954.

Mr. B. T. Broadbent, Consultant Orthodontist, was appointed to attend one session per week as from 8th November, 1954.

Review of the work done during the year.—Routine inspections of pupils number 11,203 in 70 schools and in the Children's Homes in Wellington and Shrewsbury.

The number of inspections was not equal to that of last year, the percentage falling from 32% of the school population to 26% in 1954. This fall is accounted for by the large carry-over of pupils inspected in 1953 who were not treated until 1954, as well as by the considerable increase in the number of children who applied at the clinics for treatment as specials. The majority of these latter attended for urgent treatment but the remainder presented themselves for examination and treatment because no dental inspection had been held for a long period in their schools. The specials numbered 1,873, the highest recorded so far, being an increase of 58% over last year. With the school population steadily mounting, it will be impossible to inspect all the pupils at twelve-monthly intervals until the present strength of the dental staff is at least doubled—an unlikely prospect in the near future.

Of the 259 schools not visited during the year, 80 have not been visited for two years and 74 for three years or more.

The percentage of pupils found upon inspection to require treatment was 66%, lower by 3% than last year. This figure, however, is not a true reflection of the dental condition of the school population as the majority of the pupils examined were in the higher age groups, a fact which leaves out of account the high rate of caries to be found in the teeth of the younger ones and of the school entrants. Of the number referred for treatment 74% accepted it.

In addition to the all-round increase in the amount of treatment carried out to be expected with a larger staff, there was a rise of 13% in the quantity of conservative work done and a fall of 5% in the number of teeth extracted as compared with 1953. The average number of visits paid by each child for treatment was 2.3 as against 2.16 for 1953. The longer the period is between inspections the greater becomes the number of visits each patient must pay in order to be made dentally fit.

Emphasis was again placed upon the treatment of the permanent teeth at the expense of the deciduous. As soon as the staffing situation permits, more time will be devoted to the conservation of the deciduous teeth.

The bulk of the work done was carried out as in 1953 in the north and east of the County, in the Borough of Shrewsbury and its vicinity. In September an officer took up duty in the southern part of the County enabling the Ludlow clinic to be re-opened for regular use. Weekly sessions were also re-started in Bridgnorth. Unfortunately, the change in the staff which led to the re-opening of the Ludlow dental clinic and the resumption of work in the south of the County resulted in the loss of a full-time officer in the Wellington area. Nevertheless regular weekly sessions were maintained at the Wellington clinic.

More general anaesthetics were administered in 1954 than in any previous year. The appointment of part-time anaesthetists to the Dental Service greatly facilitated this work in all parts of the County.

Details of the time spent and treatment carried out appear with the tables in the appendices of this report.

Orthodontics.—More time was given during the year to orthodontic treatment. This popular and sought after treatment has in the past had to be limited on account of the staffing shortage, but with the improvement in the staff situation the dental officers were encouraged to undertake some more cases.

In October, Mr. B. T. Broadbent, F.D.S., a consultant orthodontist, was appointed to hold one weekly session for orthodontic treatment in the Council's dental clinic in Shrewsbury. He deals with the more complex cases himself and advises other members of the staff in the treatment of the less difficult cases when required.

The following is a summary of the orthodontic work carried out during the year:—

Number of cases brought forward from 1953	31
„ „ new cases undertaken	91
„ „ cases completed in 1954	26
„ „ „ still in progress and carried forward	96
„ „ fixed appliances fitted	5
„ „ removable appliances fitted	83

A further expansion in this kind of treatment is expected to take place in 1955.

Installation of X-ray Machines.—The X-ray machine for use in the south of the County was installed early in the year at the Dental Base Clinic at Ludlow and taken into use.

Dental Clinic Accommodation.—The overall plan for the provision of suitable dental clinic accommodation in the County area saw a further partial fulfilment in 1954 by the taking into use of the dental facilities provided in the new child welfare centre at Dawley. This new, conveniently situated and well-planned subsidiary dental clinic gives Dawley and district the dental accommodation they badly needed. It is much appreciated by parents and patients and no less so by the dental staff who work there.

The subsidiary dental clinic at Ellesmere was almost finished by the end of 1954. It will be equipped and ready for use early next year.

In June delivery was taken of a “Gloster” Mobile Dental Unit. This trailer-type dental surgery on wheels is the next best thing to a static clinic. It solves the problem of dental accommodation in the outlying parts of the County where the provision of permanent dental clinics is not justified. The Unit is taken and placed on a convenient site in the school playground in readiness for the dental officer's visit. Heads of schools welcome it as, with its use, there is the very minimum disturbance of school routine and a great reduction in the loss of school time by pupils who receive their treatment in it. It has proved to be popular with the children and is in pressing demand by the dental officers working in the rural areas. Since it was taken into use it has travelled widely in the County.

Adequate accommodation for the work of the Dental Service is urgently required at Madeley, Bridgnorth, Market Drayton and Whitchurch. It is expected that the Madeley Centre, now building, will be ready by the end of 1955 and it is hoped that the dental accommodation at the three other centres will materialise in 1956.

Dental Inspections and Treatment in Schools other than Maintained Primary and Secondary Schools.—Under Section 78 of the Education Act, 1944, dental inspection and treatment were carried out at Condover Hall School, Condover, which is maintained by the National Institute for the Blind.

Particulars of the number of pupils dealt with and the treatment done are given below:—

Number of pupils inspected	..	..	..	..	..	..	..	..	72
Number of pupils found to require treatment	..	..	..	..	..	..	..	..	50
Number of pupils actually treated	..	..	..	..	..	..	..	..	49
Number of attendances made by pupils for treatment	..	..	..	..	..	..	..	..	66
Half-days devoted to:—	Inspections	..	..	..	1	}	..	..	9
	Treatment	..	..	..	8		..	..
Fillings:—	Permanent Teeth	..	..	..	46	}	..	..	46
	Deciduous Teeth	..	..	..	0		..	..
Teeth filled:—	Permanent Teeth	..	..	..	46	}	..	..	46
	Deciduous Teeth	..	..	..	0		..	..
Extractions:—	Permanent Teeth	..	..	..	4	}	..	..	17
	Deciduous Teeth	..	..	..	13		..	..
Administration of general anaesthetics for extraction	..	..	..	..	..	..	..	..	4
Other operations:—	Permanent Teeth	..	..	..	26	}	..	..	26
	Deciduous Teeth	..	..	..	0		..	..
Partial dentures supplied	..	..	..	..	..	..	..	..	1

G. R. CATCHPOLE,
Principal School Dental Officer.

DIPHTHERIA IMMUNISATION

The School Medical Officer takes the opportunity to urge immunisation in the case of entrants not yet protected, on the occasion of their first routine medical inspection at school. Similarly, when children in other age groups are medically examined, the opportunity is taken to stress the importance of this prophylactic measure, and to try to obtain the consent of the parents in the case of those children who have not been immunised. School Nurses, Health Visitors and District Nurses, who in the course of their duties discover school children who have missed immunisation, also endeavour to obtain the necessary parental "consents." Propaganda methods, comprising the display of films and posters and advertisements in the press, are also used from time to time to remind the public of the importance of immunisation against diphtheria.

During 1954, the total number of children of school age who were immunised was 398; and of this number 234 were treated by School Medical Officers, and 164 by general medical practitioners—58.8 and 41.2 per cent. respectively.

In the case of children immunised against diphtheria in infancy, a reinforcing injection is advocated after an interval of three or four years, and School Medical Officers at routine medical inspections advise such in appropriate cases.

Of the 4,115 children re-immunised, 2,895 were dealt with by School Medical Officers, and 1,220 by general medical practitioners—70.7 and 29.3 per cent. respectively.

In the statistical table given below, the total number of children of school age immunised during 1954 has been apportioned amongst the various Sanitary Districts in which they are resident. Of the children of school age in the County at the end of the year, 82.6 per cent. had been immunised against diphtheria.

SCHOOL CHILDREN IMMUNISED DURING 1954

Area	Local Sanitary Authority	Immunised	Re-Immunised
N.W. Combined Districts	Ellesmere Urban	6	21
	Ellesmere Rural	9	142
	Wem Urban	5	44
	Wem Rural	39	247
	Whitchurch Urban	10	144
N.E. Combined Districts	Dawley Urban	11	107
	Market Drayton Urban	10	141
	Drayton Rural	24	230
	Newport Urban	—	41
	Oakengates Urban	24	66
	Shifnal Rural	15	256
	Wellington Urban	10	118
	Wellington Rural	23	317
S.W. Combined Districts	Atcham Rural	25	223
	Bishop's Castle Borough	—	12
	Church Stretton Urban	1	28
	Clun Rural	9	100
	Wenlock Borough	15	114
	Ludlow Borough	1	66
	Ludlow Rural	11	206
Bridgnorth ..	Bridgnorth Borough	20	69
	Bridgnorth Rural	21	240
Oswestry ..	Oswestry Borough	1	111
	Oswestry Rural	45	324
Shrewsbury ..	Shrewsbury Borough	63	748
	Whole County (1954) ..	398	4,115
	Whole County (1953) ..	257	3,043

Particulars of the numbers of children between 5 and 15 years of age who have been primarily immunised against diphtheria in each year since 1942 are given below:—

Year	1942	Children immunised	..	8,310
„	1943	„	„	4,569
„	1944	„	„	695
„	1945	„	„	533
„	1946	„	„	546
„	1947	„	„	324
„	1948	„	„	413
„	1949	„	„	631
„	1950	„	„	219
„	1951	„	„	266
„	1952	„	„	242
„	1953	„	„	257
„	1954	„	„	398
		Total	..	17,403

The effects of the Immunisation Campaign are demonstrated by the following table showing the incidence of Diphtheria and the numbers of deaths from this disease among persons of all ages in the County during the past 20 years.

NOTIFICATIONS OF DEATHS FROM DIPHTHERIA SINCE 1935

Year	Notifications	Deaths
1935	223	20
1936	301	20
1937	206	7
1938	185	19
1939	133	13
1940	236	11
1941	237	9
1942	121	6
1943	53	6
1944	25	1
1945	7	—
1946	5	2
1947	18	2
1948	1	—
1949	5	1
1950	2	—
1951	—	—
1952	1	—
1953	—	—
1954	—	—

VACCINATION

During 1954, fifty-seven children between the ages of 5 and 14 years were vaccinated against Smallpox. Of this number, 5 vaccinations were performed by School Medical Officers and 52 by general medical practitioners.

In addition, 89 children were re-vaccinated—all by general medical practitioners.

SCHOOL CANTEENS

Medical Examination of Staff.—In order to ensure as far as possible that those engaged in the Schools Meals Service are not suffering from, or carriers of, some form of infectious disease, liable to be transmitted by contamination of the food which is served in the canteens, a scheme for the medical examination of canteen staffs, particulars of which are given below, was put into operation on 1st February, 1950.

There are three categories of premises in which food is either prepared or served to school children having a mid-day meal in school, namely:—

- (a) Central Kitchens, where the meals are prepared and sent out to School Canteens;
- (b) Self-contained Canteens, where meals are prepared and served on the school premises;
- (c) Canteens for dining purposes only, where meals are served which have been prepared at the Central Kitchens.

An effort is made to examine the personnel employed in these establishments at least once per annum, and new entrants to the service are examined as soon as possible after appointment.

The majority of the kitchens and canteens are located either at, or within easy reach of, one or other of the schools which they serve, and the opportunity to carry out these examinations is taken when these schools are visited by a School Medical Officer.

These medical examinations are directed towards establishing the cleanliness of the person, clothing and hands of those employed in the preparation or handling of food; the absence of infectious conditions such as septic skin lesions, discharging ears and chronic catarrh; and also of non-infectious but highly undesirable conditions such as eczema or other forms of dermatitis.

If on the occasion of the initial examination of an employee recruited to the School Canteen Service, the candidate is found to have a history or shows symptoms of intestinal disorder, arrangements are made by the examining Medical Officer for specimens of faeces and if necessary urine to be submitted to the Public Health Laboratory, Shrewsbury, for investigation. A record card for each canteen worker is kept in the County Health Department on which particulars of clinical examinations and bacteriological tests are recorded.

The following particulars give some indication of this work during the year:—

KITCHENS AND SCHOOL CANTEENS

Premises		Personnel				
Type	Number	Supervisors	Cooks	Helpers	Others	Total
Central Kitchens ..	15	17	25	97	19	158
Self-contained Canteens	113	1	127	325	58	511
Canteens for dining only	209	—	—	369	82	451
Total ..	337	18	152	791	159	1,120

During 1954 a total of 920 examinations of canteen personnel (199 initial and 721 re-examinations) was carried out and it was considered necessary for one employee to submit a specimen of excreta for bacteriological investigation, which proved, however, to be satisfactory.

In eight cases the clinical examinations were unsatisfactory. Particulars of the conditions from which the employees concerned were found to be suffering and of the action taken are given below:—

<i>Condition</i>	<i>Action Taken</i>
Suspected dermatitis (two cases)	In both cases the condition was diagnosed as not true dermatitis. After prolonged treatment the employees were subsequently found fit to resume duty.
Hypertension	The employment of this helper was terminated.
Sinusitis and ear infection ..	Suspended from duty but subsequently found fit to resume.
Chronic Psoriasis	The appointment of this helper was terminated.
Chest Condition	This helper was considered unfit for employment and her appointment was terminated.
Tuberculosis Contacts (two cases)	These two employees were suspended from duty until satisfactory reports were received from the Chest Physician.

In addition, the person and clothing of two Canteen Helpers indicated a general lack of cleanliness. Considerable improvement was reported when the two employees were re-examined after a brief interval.

A total of 13 schools remained unvisited by the School Medical Officers during the year 1954 and it was, therefore, not possible to offer examination to the staff employed in the Canteens associated with these schools.

This medical inspection scheme has also been extended to include personnel engaged in the preparation and handling of foodstuffs at the boarding schools and hostels in the County and during the year 36 such examinations were carried out by the School Medical Officers.

SUMMER CAMPS

Summer Camps for senior pupils were again organised during the months of May, June and July. Accommodation for approximately 60 pupils was made available at Dyffryn Seaside Estate, Dyffryn Ardudwy, Merioneth. Approximately 660 pupils and 40 staff passed through the camp. All the pupils were examined before admission—initially by the local School Nurse and immediately prior to departure for the camp by a School Medical Officer—and certified to be free from infection or verminous infestation before being allowed to proceed.

Medical attendance was provided when necessary by a medical practitioner resident nearby.

CHILD HEALTH SURVEY

A Joint Committee, representative of the Institute of Child Health and the Population Investigation Committee of the London School of Economics, have been conducting an enquiry into questions relating to health, growth and development. The number of children required for the purposes of this enquiry, which commenced in 1946, was 6,000, and in order to ensure that the children whom it covered were representative of all social classes in Great Britain, Medical Officers of Health of certain selected Local Health Authorities, of whom the Salop County Council were one, were asked to notify all children born in a particular week in March, 1946, and to submit each year, beginning with 1946, a report on the medical examination and on the home circumstances of each child included in the enquiry.

Twenty-four of these children are resident in this County and the Joint Committee have asked the Principal School Medical Officers of the areas concerned to continue the survey through the primary school period.

During 1954 the homes of the children concerned were visited on one occasion by the School Nurse.

HOSPITAL AND SPECIALIST SERVICES

Children found to be suffering from defects requiring either the advice of a Consultant or in-patient treatment are referred to the following hospitals, all of which come under the Birmingham Regional Hospital Board. Children suffering from chest conditions are seen by a Chest Physician at one of the Chest Clinics.

General Medical and Surgical Conditions:

The Royal Salop Infirmary, Shrewsbury.
Cross Houses Hospital, near Shrewsbury.
The North Staffordshire Royal Infirmary, Stoke-on-Trent.
The Kidderminster and District General Hospital, Kidderminster.
The Wolverhampton Royal Hospital, Wolverhampton.
The Staffordshire General Infirmary, Stafford.

Eye Conditions:

The Eye, Ear and Throat Hospital, Shrewsbury.
The North Staffordshire Royal Infirmary, Stoke-on-Trent.
The Staffordshire General Infirmary, Stafford.
The Kidderminster and District General Hospital, Kidderminster.
The Wolverhampton and Midland Counties Eye Infirmary, Wolverhampton.

Ear, Nose and Throat Conditions:

The Eye, Ear and Throat Hospital, Shrewsbury.
The North Staffordshire Royal Infirmary, Stoke-on-Trent.
The Staffordshire General Infirmary, Stafford.
The Kidderminster and District General Hospital, Kidderminster.
The Wolverhampton Royal Hospital, Wolverhampton.

Respiratory Tuberculosis:

Shirlett Sanatorium.

Orthopaedic Conditions, including Fractures:

The Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry.

X-Ray Treatment of Ringworm:

The Midland Skin Hospital, Birmingham.

Special Forms of Treatment not elsewhere available.

The Birmingham Children's Hospital, Birmingham.

SCHOOL CLINICS PROVIDED BY THE LOCAL EDUCATION AUTHORITY

The School Clinics referred to in the table below are held at Child Welfare Centres, with the exception of the Dental Clinic which is held in specially adapted premises at 5 Belmont, Shrewsbury, the Minor Ailment Clinic which is held at the Monkmoor Modern School, Shrewsbury, and the Child Guidance Clinics at Donnington and Shrewsbury, the former of which is held in the Donnington Infant School, and the latter in the County Buildings.

Centre	Sessions				
BISHOP'S CASTLE	<i>Speech Therapy:</i>	Tuesday	1.00 p.m.—4.30 p.m.		
	<i>Dental:</i>	By arrangement			
BRIDGNORTH	<i>Minor Ailments:</i>	Weekdays	9.00 a.m.—10.30 a.m.		
	<i>Speech Therapy:</i>	Friday	10.00 a.m.—12.30 p.m.		
	<i>Dental:</i>	By arrangement	1.30 p.m.—5.00 p.m.		
DAWLEY	<i>Speech Therapy:</i>	Wednesday	1.30 p.m.—3.30 p.m.		
	<i>Dental:</i>	By arrangement			
DONNINGTON INFANT SCHOOL	<i>Child Guidance:</i>	Tuesday	10.00 a.m.— 4.00 p.m.		
IRONBRIDGE	<i>Minor Ailments:</i>	Friday	9.00 a.m.—12.00 noon		
		Other weekdays	9.00 a.m.—10.00 a.m.		
	<i>Speech Therapy:</i>	Wednesday	10.00 a.m.—12.15 p.m.		
	<i>Dental:</i>	By arrangement			
LUDLOW	<i>Dental:</i>	Saturday and by arrangement	9.00 a.m.—12 noon		
	<i>Speech Therapy:</i>	Thursday	11.00 a.m.—12.15 p.m.		
	<i>Child Guidance:</i>	By arrangement	1.30 p.m.— 4.30 p.m.		
MARKET DRAYTON	<i>Minor Ailments:</i>	Wednesday	9.30 a.m.—10.30 a.m.		
	<i>Dental:</i>	By arrangement			
	<i>Speech Therapy</i>	Friday	1.15 p.m.— 4.00 p.m.		
	<i>Child Guidance:</i>	By arrangement			

Centre	Sessions					
NEWPORT	<i>Speech Therapy:</i>	Tuesday	1.30 p.m.— 3.45 p.m.			
	<i>Dental:</i>	Saturday	9.00 a.m.—12.00 noon			
		and by arrangement				
OAKENGATES	<i>Dental:</i>	By arrangement				
OSWESTRY	<i>Minor Ailments:</i>	Wednesday	9.00 a.m.—11.00 a.m.			
		Other weekdays	9.00 a.m.—10.00 a.m.			
	<i>Dental:</i>	Saturday	9.00 a.m.—12.00 noon			
		and by arrangement				
	<i>Speech Therapy:</i>	Monday	{ 10.30 a.m.—12.30 p.m. 1.30 p.m.— 4.00 p.m.			
	<i>Child Guidance:</i>	By arrangement				
WELLINGTON	<i>Minor Ailments:</i>	Thursday	9.00 a.m.—11.00 a.m.			
		Other weekdays	9.00 a.m.—10.30 a.m.			
	<i>Dental:</i>	By arrangement				
	<i>Speech Therapy:</i>	Monday	{ 9.15 a.m.— 1.00 p.m. 2.00 p.m.— 5.00 p.m.			
	<i>Child Guidance:</i>	Wednesday				
WEM	<i>Dental:</i>	By arrangement				
	<i>Speech Therapy:</i>	Wednesday	1.30 p.m.— 4.00 p.m.			
WHITCHURCH	<i>Dental:</i>	By arrangement				
	<i>Speech Therapy:</i>	Wednesday	9.45 a.m.—12.15 p.m.			
	<i>Child Guidance:</i>	By arrangement				
SHREWSBURY						
(a) Health Centre, Murivance	<i>Minor Ailments:</i>	Friday	9.00 a.m.—12.00 noon			
		Other weekdays	9.00 a.m.—10.30 a.m.			
	<i>Speech Therapy:</i>	Thursday	{ 9.00 a.m.—12.30 p.m. 2.00 p.m.— 5.00 p.m.			
		Saturday				
(b) The White House, Ditherington	<i>Minor Ailments:</i>	Weekdays	9.00 a.m.—11.30 a.m.			
(c) Monkmoor (at Monkmoor School)	<i>Minor Ailments:</i>	Weekdays	9.00 a.m.—10.30 a.m.			
(d) Education Office, County Buildings	<i>Child Guidance:</i>	Monday	10.00 a.m.— 4.00 p.m.			
(e) No. 5 Belmont	<i>Dental:</i>	Weekdays	9.00 a.m.— 5.00 p.m.			

STATISTICAL TABLES

TABLE I. (A) PERIODIC MEDICAL INSPECTIONS.

Number of Inspections in the prescribed groups:—

				Age Group				
Entrants	..	..	..	5 years (approx.)	..	..	..	4,433
Second Age Group	..	..	..	10+ years	..	..	..	4,536
Third Age Group	..	..	..	14 years (Modern Schools), 16 years and other leavers at Grammar Schools	..	..	..	2,674
								11,643
Number of other Periodic Inspections	..	..	..	8 years and 14 years (Grammar Schools)	..	..	..	5,772
								17,415

(B)—OTHER INSPECTIONS.

Special Inspections	..	..	..	..	..	..	1,826
Re-Inspections	..	..	..	..	..	..	12,008
							13,834

(C)—PUPILS FOUND TO REQUIRE TREATMENT.

Number of Individual Pupils found at Periodic Medical Inspection to Require Treatment (excluding Dental Diseases and Infestation with Vermin).

Group (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Table IIA (3)	Total individual pupils (4)
Entrants	47	421	453
Second Age Group	541	283	803
Third Age Group	373	135	498
Total (prescribed groups) ..	961	839	1,754
Other Periodic Inspections ..	591	477	973
Grand Total ..	1,552	1,316	2,727

Individual pupils may be recorded in both columns (2) and (3) of the above table; therefore the total in column (4) is not the sum of columns (2) and (3).

TABLE II.

(A) RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31st DECEMBER, 1954

Defect Code No.	Defect or Disease	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
		Number of Defects		Number of Defects	
		Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation, but not requiring treatment
	(1)	(2)	(3)	(4)	(5)
4	Skin	87	205	9	10
5	Eyes (a) Vision	1,552	622	96	42
	(b) Squint	180	102	16	3
	(c) Other	54	90	5	1
6	Ears (a) Hearing	40	104	3	12
	(b) Otitis Media	60	157	—	1
	(c) Other	16	32	—	6
7	Nose or Throat	382	1,773	5	40
8	Speech	59	197	1	15
9	Cervical Glands	70	620	2	12
10	Heart and Circulation	7	260	1	11
11	Lungs	39	292	2	13
12	Developmental:—				
	(a) Hernia	16	57	—	6
	(b) Other	94	170	5	4
13	Orthopaedic:—				
	(a) Posture	11	209	2	26
	(b) Flat Foot	96	413	12	27
	(c) Other	184	787	22	28
14	Nervous system:—				
	(a) Epilepsy	10	9	1	2
	(b) Other	14	94	—	1
15	Psychological:—				
	(a) Development	87	215	—	53
	(b) Stability	26	167	—	17
16	Other (Dental)	1,641	470	20	10

(B)—CLASSIFICATION OF THE GENERAL CONDITION OF PUPILS INSPECTED DURING THE YEAR IN THE AGE GROUPS

Age Groups	Number of Pupils Inspected	A. (Good)		B. (Fair)		C. (Poor)	
		No.	%	No.	%	No.	%
Entrants	4,433	2,404	54.23	2,001	45.14	28	0.63
Second Age-Group	4,536	2,530	55.78	1,977	43.58	29	0.64
Third Age-Group	2,674	1,646	61.56	1,018	38.07	10	0.37
Other Periodic Inspections	5,772	3,246	56.24	2,493	43.19	33	0.57
Total for 1954 ..	17,415	9,826	56.42	7,489	43.01	100	0.57

TABLE III.—INFESTATION WITH VERMIN

(1) Total number of examinations in the schools by the School Nurses or other authorised persons ..	114,399
(2) Total number of individual pupils found to be infested	1,337
(3) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	79
(4) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	10

TABLE IV.—TREATMENT TABLES**GROUP I.—MINOR AILMENTS (excluding Uncleanliness, for which see Table III)**

	Number of Defects treated, or under treatment during the year	
	By the Authority	Otherwise
Skin:—		
Ringworm: (i) Scalp	12	1
(ii) Body	7	47
Scabies	2	12
Impetigo	26	52
Other skin diseases	659	87
Total ..	706	199

GROUP II.—EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of Cases dealt with	
	By the Authority	Otherwise
External and other, excluding errors of refraction and squint	187	97
Errors of refraction (including squint)	1,588*	1,219
Total ..	1,775	1,316
Number of pupils for whom spectacles were		
(a) Prescribed	1,214*	859
(b) Obtained	1,214*	859

NOTE: *Including cases dealt with under arrangements with Supplementary Ophthalmic Services.

GROUP III.—DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of Cases treated	
	By the Authority	Otherwise
Received operative treatment		
(a) for diseases of the ear	—	54
(b) for adenoids and chronic tonsillitis ..	—	805
(c) for other nose and throat conditions ..	—	44
Received other forms of treatment	—	266
Total	—	1,169

GROUP IV.—ORTHOPAEDIC AND POSTURAL DEFECTS

(a) Number treated as in-patients in hospitals	178	
	By the Authority	Otherwise
(b) Number treated otherwise, e.g. in clinics or out-patients departments	—	895

GROUP V.—CHILD GUIDANCE TREATMENT

	Number of Cases treated	
	In the Authority's Child Guidance Clinic	Elsewhere
Number of pupils treated at Child Guidance Clinics	215	—

GROUP VI.—SPEECH THERAPY

	Number of Cases treated	
	By the Authority	Otherwise
Number of pupils treated by Speech Therapist	218	—

GROUP VII.—OTHER TREATMENT GIVEN

					Number of Cases treated	
					By the Authority	Otherwise
(a) Miscellaneous Minor Ailments	..	..			2,315	318
(b) Other treatment given:						
Appendicitis	..	..	..	..	—	87
Asthma	..	..	..	..	—	42
Anaemia	..	..	..	..	—	7
Bronchitis	..	..	..	..	—	21
Bronchiectasis	..	..	..	..	—	15
Cardiac Conditions	..	..	..	..	—	17
Chest Conditions	..	..	..	..	—	13
Chorea	..	..	..	..	—	7
Diabetes	..	..	..	..	—	15
Debility	..	..	..	..	—	8
Encephalitis	..	..	..	..	—	2
Eneuresis	..	..	..	..	—	13
Epilepsy	..	..	..	..	—	17
Gastro Enteritis	..	..	..	..	—	2
Hernia	..	..	..	..	—	38
Injuries	..	..	..	..	—	18
Nephritis	..	..	..	..	—	14
Petit Mal	..	..	..	..	—	20
Pneumonia	..	..	..	..	—	17
Poliomyelitis	..	..	..	..	—	3
Rheumatism	..	..	..	..	—	14
Rheumatic Fever	..	..	..	..	—	8
Spasticity	..	..	..	..	—	8
Tuberculosis (Respiratory, mesenteric adenitis, cervical glands, etc.)	..	..			—	60
Miscellaneous	..	..	..	..	—	130
Total	..				2,315	914

N.B.—In addition to the above, a total of 241 pupils attended Chest Clinics for observation.

TABLE V.—DENTAL INSPECTION AND TREATMENT

Number of pupils inspected:—	Periodic	Age Groups	..	..	11,203	}	..	..	..	Total
	Specials	..	..	..	1,873	}	..	..	..	13,076
Number found to require treatment	..	..	..	..	..	..	..	..	..	9,246
Number offered treatment	..	..	..	..	..	..	..	..	..	9,039
Number actually treated	..	..	..	..	..	..	..	..	..	7,253*
Attendances made by pupils for treatment	..	..	..	..	..	..	..	..	..	16,692
Half-days devoted to:—	Inspection	..	..	..	98	}	..	..	..	2,163
	Treatment	..	..	..	2,065	}	..	..	..
Fillings:—	Permanent Teeth	..	..	..	10,341	}	..	..	..	12,041
	Deciduous Teeth	..	..	..	1,700	}	..	..	..
Teeth filled:—	Permanent Teeth	..	..	..	9,900	}	..	..	..	11,600
	Deciduous Teeth	..	..	..	1,700	}	..	..	..
Extractions:—	Permanent Teeth	..	..	..	1,735	}	..	..	..	7,756
	Deciduous Teeth	..	..	..	6,021	}	..	..	..
Administration of general anaesthetics for extractions	..	..	..	..	..	..	..	..	..	1,269
Other operations:—	Permanent Teeth	..	..	..	2,796	}	..	..	..	3,837
	Deciduous Teeth	..	..	..	1,041	}	..	..	..
Partial Dentures supplied	..	..	..	..	..	..	..	..	..	33

NOTE: *This figure includes 1,183 pupils brought forward from 1953.

TABLE VI.

(1) STAFF OF THE SCHOOL HEALTH SERVICE (excluding Child Guidance)

Principal School Medical Officer: Thomas S. Hall, M.D., D.P.H.*Principal School Dental Officer:* Gerald R. Catchpole, L.D.S., R.C.S.Eng.

		Number	Aggregate staff in terms of the equivalent number of whole-time officers
(a)	(i) Medical Officers (Whole-time School Health and Local Health Services)	11	5.47
	(ii) General Practitioners working part-time in the School Health Service	1	0.36
(b)	Physiotherapists, Speech Therapists, etc.: Speech Therapists	2	2
(c)	(i) School Nurses	62	14.75
	(ii) Number of the above who hold a Health Visitor's Certificate	31	—
(d)	Nursing Assistants	—	—
		Officers employed on a salary basis	
		Number	Aggregate staff in terms of the equivalent number of whole-time officers
(e)	Dental Staff:		
	(i) Principal School Dental Officer	1	0.952
	(ii) Dental Officers	4	3.212
	(iii) Orthodontists (if not already included in (e)(i) or (e)(ii) above)	—	—
	Total	5	4.164
		Officers employed on a sessional basis	
		Number	Aggregate staff in terms of the equivalent number of whole-time officers
		—	—
		1	0.518
		1	0.09
		2	0.608
		Number	Aggregate staff in terms of the equivalent number of whole-time officers
	(iv) Dental Attendants	6	4.772
	(v) Other Staff (specify)	—	—

(2)—NUMBER OF SCHOOL CLINICS (i.e. *premises* at which clinics are held for school children) provided by the Local Education Authority for the medical and/or dental examination and treatment of pupils attending maintained primary and secondary schools.

Number of School Clinics .. 17

N.B.—One Mobile Dental Caravan was provided by the Authority during 1954 and was in use for the period 1st July to 31st December, 1954.

(3)—TYPE OF EXAMINATION AND/OR TREATMENT provided at the school clinics returned in Section (2) either directly by the Authority or under arrangements made with the Regional Hospital Board for examination and/or treatment to be carried out at the clinic.

Examination and/or Treatment (1)	Number of School Clinics (i.e. premises) where such treatment is provided:	
	directly by the Authority (2)	under arrangements made with Regional Hospital Boards or Boards of Governors of Teaching Hospitals (3)
A. Minor ailment and other non-specialist examination or treatment	8	—
B. Dental	13	—
C. Ophthalmic	2	1
D. Ear, Nose and Throat	—	—
E. Orthopaedic	—	10
F. Paediatric	—	—
G. Speech Therapy	12	—
H. Others	—	—

Arrangements made with the Supplementary Ophthalmic Service have been returned in Column (2) and those made with the Hospital and Specialist Service in Column (3).

(4)—CHILD GUIDANCE CENTRES

Number of Child Guidance Centres provided by the Authority .. 7

Staff of Centres	(a) Number	(b) Aggregate in terms of the equivalent number of whole-time officers
Psychiatrists*	1	0.18
Educational Psychologists	2	2
Psychiatric Social Workers	1	0.95

*The services of the Psychiatrist are made available by arrangement with the Regional Hospital Board.

TABLE VII.—HANDICAPPED PUPILS REQUIRING EDUCATION AT SPECIAL SCHOOLS (OTHER THAN HOSPITAL SCHOOLS) OR BOARDING IN BOARDING HOMES

NOTES:

- (i) In Section A changes of special school and short breaks are ignored.
- (ii) In Section C (iii) is included all children being boarded under Regulations 17—24 of the School Health Service and Handicapped Pupils Regulations, 1953, other than those already shown under Section C (i) or C (ii).
- (iii) Section E includes pupils awaiting places in a Special School or Boarding Home, but who for the time being are attending ordinary schools or receiving home tuition under Section 56 of the Education Act, 1944.
- (iv) In all Sections children not belonging to the area of any Authority are included by the Authority which secures or seeks a place for the child.
- (v) Children suffering from multiple disabilities are classified under the major disability.
- (vi) Children in or awaiting places in Special Classes in ordinary schools are not included in this return.
- (vii) This return does not include children at Hospital Special Schools.

	(1) Blind (2) Partially sighted (3) Deaf			(4) Partially Deaf (5) Delicate (6) Physically Handicapped			(7) Educationally subnormal (8) Maladjusted (9) Epileptic			TOTAL 1—9
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
In the calendar year ending 31st December, 1954:—										
A. Handicapped Pupils <i>newly placed in Special Schools</i> or Boarding Homes ..	1	2	5	4	7	7	34	16	1	77
B. Handicapped Pupils <i>newly ascertained</i> as requiring education at Special Schools or boarding in Homes ..	1	5	3	3	22	7	66	16	1	124

Number of children reported during the year:—

(a) under Section 57(3) (excluding any returned under (b) ..	28
(b) under Section 57(3) relying on Section 57(4)	—
(c) under Section 57(5) of the Education Act, 1944	25

	(1) Blind (2) Partially sighted (3) Deaf			(4) Partially Deaf (5) Delicate (6) Physically Handicapped			(7) Educationally subnormal (8) Maladjusted (9) Epileptic			TOTAL 1—9
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
On or about December 1st, 1954:—										
C. Number of Handicapped Pupils from the area:—										
(i) attending Special Schools as										
(a) Day Pupils	1	—	—	—	—	—	—	—	—	1
(b) Boarding Pupils	3	5	24	7	10	16	141	21	3	230
(ii) attending independent schools under arrangements made by the Authority	—	—	6	4	—	—	—	—	—	10
(iii) boarded in Homes and not already included under (i) or (ii) ..	—	—	—	—	—	—	—	—	—	—
TOTAL (C) ..	4	5	30	11	10	16	141	21	3	241
D. Number of Handicapped Pupils being educated under arrangements made under Section 56 of the Education Act, 1944:—										
(a) in hospitals	—	—	—	—	—	7	—	—	—	7
(b) elsewhere (at home)	—	—	1	—	—	28	—	—	1	30
E. Number of Handicapped Pupils from the area requiring places in special schools (including any such unplaced children who are temporarily receiving home tuition or whose parents have not yet consented to their attending a Special School):										
(i) Day	—	—	—	—	—	—	—	—	—	—
(ii) Boarding	2	4	3	4	44	6	206	1	—	270

Amount spent on arrangements under Section 56 of the Education Act, 1944, for the education of handicapped pupils otherwise than at school in the financial year ended 31st March, 1954 .. £3,308 0s. 0d.

Return showing independent schools assisted by the Local Education Authority under Section 6 of the Education (Miscellaneous Provisions) Act, 1953, in respect of handicapped pupils:—

(1) Name and Address of School	(2) State whether for Boys, Girls or both	(3) Number of pupils whose fees are being paid in whole or part by the L.E.A.	(4) Category of handicap of pupils in Column 3	(5) Age range of pupils in Column 3	(6) Annual rate of payment by L.E.A. per pupil
Hamilton Lodge School for the Deaf, Brighton	Both	1	1 Totally Deaf	7	£170 per annum
Wessington Court School for the Deaf, Woolhope, Hereford ..	Both	8	4 Totally Deaf	3—9	£236 5s. 0d. per annum
Beechcroft School, Highams Park, London	Girls	1	4 Partially Deaf 1 Totally Deaf	8	£242 4s. 0d. per annum